

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form 990-PF

#### Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

		un 1 , <b>2012</b>	, and ending Ma	y 31 , 2013	
	oundation			A Employer identification num 88-0396633	nber
Number a	ess Family Foundation nd street (or PO box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number (see the in	nstructions)
	W Sahara Ave		670	(702) 248-600	
City or tov			ZIP code	C If exemption application is	ponding chack hara
	Vegas	NV	89102	C il exempuon application is i	pending, check here.
G Ch	eck all that apply Initial return	Initial Return of a form	er public charity	D 1 Foreign organizations, che	ck here 🟲
	Final return Address change	Amended return		2 Foreign organizations meet	ting the 85% test, check
H C		Name change (c)(3) exempt private fou	Indation	here and attach computation	on
"	Section 4947(a)(1) nonexempt charitable trus		nvate foundation	E If private foundation status	was terminated
TE	1 11 1	ounting method. X C		under section 507(b)(1)(A),	
	Sec. Death and and (A) 1 and (A)	Other (specify)		F If the foundation is in a 60-	month termination ==
_ <b>&gt;</b> \$		column (d) must be on c	ash basis.)	under section 507(b)(1)(B),	
Part		(a) Revenue and	(b) Net investmen	t (c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see instructions).)	000 000	· · · · · · · · · · · · · · · · · · ·		,
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck I if the foundn is not reg to att Sch B	200,000.			
	3 Interest on savings and temporary				
	cash investments	18.			
	4 Dividends and interest from securities				A -
	5a Gross rents	,			
ь	or (loss)  6 a Net gain/(loss) from sale of assets not on line 10	, :			, ,
R E V	<b>b</b> Gross sales price for all	,			
V	assets on line 6a  7 Capital gain net income (from Part IV, line 2)	-			
E N	8 Net short-term capital gain	€6	y 58		
U E	9 Income modifications				
<u>.</u> 5102	returns and allowances				
	<b>b</b> Less Cost of goods sold		ľ		
9 19	c Gross profit/(loss) (att sch)		3 4		
•	11 Other income (attach schedule)				U
ار ار					
<u></u>	12 Total. Add lines 1 through 11	200,018.			<u></u> _
۲	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	0.	<u> </u>		
ñ	15 Pension plans, employee benefits				
ANINEL	16 a Legal fees (attach schedule)				
₹ Ĝ	<b>b</b> Accounting fees (attach sch)				
SC	c Other prof fees (attach sch)				
SOPERAT	17 Interest		KI	ECEIVED	
E Ť R R	18 Taxes (attach schedule)(see instrs)		8		
A A	19 Depreciation (attach sch) and depletion		SE	P 6 2013 OSC	1. to 1.
NV	20 Occupancy		19 02	2013 [6]	
N V G E	21 Travel, conferences, and meetings		00		
A E N X D P	22 Printing and publications		L OG	DEN, UT	
	23 Other expenses (attach schedule)  License	25.			
E N S	24 Total operating and administrative	۷۵۰	<del></del>		
Ē	expenses. Add lines 13 through 23	125.			
-	25 Contributions, gifts, grants paid	216,200.			216,200.
	26 Total expenses and disbursements. Add lines 24 and 25	216 225			216 202
	27 Subtract line 26 from line 12:	216,325.			216,200.
	a Excess of revenue over expenses				
	and disbursements	-16,307.			,
	<b>b Net Investment income (if negative, enter -0-)</b>				
DAA	C Adjusted net income (if negative, enter -0-)		<u></u>	. <u> </u>	Form 000 BE (2012)

Dar		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	year
/ ai	<u> </u>	(See instructions)	(a) Book Value	( <b>b</b> ) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	_		
	2	Savings and temporary cash investments	36,689.	20,383.	20,383.
	3	Accounts receivable	·		
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
Α	′	Less: allowance for doubtful accounts			
Ş	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			<del></del>
T S	1 1	Investments — U.S. and state government			
3		obligations (attach schedule)			
		Investments — corporate stock (attach schedule)			
	c	Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment. basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			<del></del>
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment. basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	36,689.	20,383.	20,383.
Ļ	17	Accounts payable and accrued expenses			
À	18	Grants payable			
B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
+	21	Mortgages and other notes payable (attach schedule)			
Ē	22	Other liabilities (describe			
<u> </u>	23	Total liabilities (add lines 17 through 22)		· · · · · · · · · · · · · · · · · · ·	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
ΝF	24	Unrestricted			
E U T N	25	Temporarily restricted			
D	26	Permanently restricted	-		
A S B		Foundations that do not follow SFAS 117, check here . Fand complete lines 27 through 31.		-	
A S S A E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds	36,689.	20,383.	
O E R S	30	Total net assets or fund balances (see instructions)	36,689.	20,383.	
	31	Total liabilities and net assets/fund balances	·		
Dar	 	(see instructions)	36,689.	20,383.	
			•	<u> </u>	
1	Total end-c	net assets or fund balances at beginning of year — Part II, column (a) of-year figure reported on prior year's return)	a), line 30 (must agree w · · · · · · · · · · · · · · ·	ith	36,689.
2		amount from Part I, line 27a			-16,307.
3		increases not included in line 2 (itemize) Pounding			1.
4	Add I	ines 1, 2, and 3		4	20,383.
5	Decrea	ases not included in line 2 (itemize) ▶	. <b></b>	5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, column (b), line 30	6	20,383.

(a) List and describ	e the kind(s) of property sold (e.g., real se; or common stock, 200 shares MLC	estate.	(b) How acc P — Purch D — Dona	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
 1 a	·	<del> </del>				
b						
С						
d		<u></u> ,				
<u>e</u>					l	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale			(h) Gaın or (e) plus (f) mi	
a						
b						
<u> </u>						
d						
Complete only for coasts show	_l ving gain in column (h) and owned by tl	o foundation on 12/21/60			- 0 (0.1	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an			(f) Gains (Col ain minus column (k an -0-) <b>or</b> Losses (fr	), but not less
a						
b						
c					•	
d						
e	<u> </u>				т	
2 Capital gain net income or (ne	If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7		2		
3 Net short-term capital gain or (	(loss) as defined in sections 1222(5) ar	id (6)				
ın Part I, line 8	8, column (c) (see instructions). If (los			3		
	er Section 4940(e) for Reduce foundations subject to the section 494			ome		
If 'Yes,' the foundation does not qual	ction 4942 tax on the distributable amor lify under section 4940(e) Do not comp in each column for each year, see the r	olete this part.			Yes	No
(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass		(colu	(d) Distribution imn (b) divided b	ratio y column (c))
2011	242,275.		0.			0.000000
2010	354,627.					
2009						
2008						
2007		<u>–</u> .				
2 Total of line 1, column (d)				2		0.00000
3 Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the tota n has been in existence if less than 5 y	on line 2 by 5, or by the ears		3		0.000000
4 Enter the net value of nonchar	itable-use assets for 2012 from Part X,	line 5		4		0.
5 Multiply line 4 by line 3				5		0.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		0.
8 Enter qualifying distributions fr	om Part XII, line 4			8		216,200.
If line 8 is equal to or greater the Part VI instructions.	han line 7, check the box in Part VI, line	e 1b, and complete that part of	using a 1%	tax	ate. See the	

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	instru	uctions	)	
1 :	a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)				
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			
	check here . ► X and enter 1% of Part I, line 27b	44.			
(	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			0.
6	Credits/Payments				
	a 2012 estimated tax pmts and 2011 overpayment credited to 2012				
1	b Exempt foreign organizations — tax withheld at source	e want Kangara	John Miller Eligip		
	c Tax paid with application for extension of time to file (Form 8868) 6 c				
(	d Backup withholding erroneously withheld				
7		7			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0.
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11			
Pa	MAN Statements Regarding Activities				
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a	Yes No
ı	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
•	c Did the foundation file Form 1120-POL for this year?			1 c	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	Х
	If 'Yes,' attach a detailed description of the activities.		j		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3	X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a	Х
ı	<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4 b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	X
	If 'Yes,' attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				j j
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		[	7	Х
8 8	a Enter the states to which the foundation reports or with which it is registered (see instructions)				
	NV - Nevada				
ı	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part X	(5) (IV .		9	X
10				, l	
BAA	and addresses		For	10   n 990-	X   PF (2012)
	•			+55	\~~'-'

Form	990-PF(2012) Andress Family Foundation	88-0396633	Page 5
Pa	Statements Regarding Activities (continued)	· · · · · · · · · · · · · · · · · · ·	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If Yes', attach schedule (see instructions)		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement (see instructions).	erson had	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption appli	cation? 13	
	Website address		
14	The books are in care of Andress Enterprises, Inc. Telephone Located at 2300 W Sahara Ave STE 670 Las Vegas NV ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	eno <u>(702)</u> 24 89102	<u>8-6004</u> _
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15	ш
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authorit bank, securities, or other financial account in a foreign country?	y over a	Yes No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of foreign country	f the	
Peo	Statements Regarding Activities for Which Form 4720 May Be Required	·	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes No
1 :	During the year did the foundation (either directly or indirectly)		163 110
,,,	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes No	
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	∏Yes ⊠No	
b	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1	b
	Organizations relying on a current notice regarding disaster assistance check here		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1	c X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )		
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?	X Yes	
	If 'Yes,' list the years 20 10 , 20 11 , 20 , 20		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)		p X
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here		
	20 _ , 20 _ , 20 _ , 20		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No	
b	If Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)		b
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		a X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4	
BAA			90-PF (2012)
		FUIII <b>3</b>	99-FF (2012)

Form 990-PF (2012) Andress Family For		_	88-039	96633 Page <b>6</b>
Partiviles Statements Regarding Activit		n 4720 May Be Req	uired (continued)	
5 a Dunng the year did the foundation pay or incur a	-			
(1) Carry on propaganda, or otherwise attempt t	o influence legislation (se	ection 4945(e))?	· · · · · Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registratio	n drive?			No
(3) Provide a grant to an individual for travel, stu	idy, or other similar purpo	oses?	· · · · · Yes X	No
(4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49	a charitable, etc, organi 40(d)(2)? (see instruction	zation described	····· Yes 🗓	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	· · · · · Yes 🛚 X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b
Organizations relying on a current notice regardi				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	_ ∏Yes 厂	No
If 'Yes,' attach the statement required by Regula				
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirectl	ly, to pay premiums	····· Yes 🗓	No
<b>b</b> Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	on a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870				
7 a At any time during the tax year, was the foundation				
b If 'Yes,' did the foundation receive any proceeds  Part VIII Information About Officers, D				
and Contractors	nectors, rrustees,	roundation Manag	gers, migniy Paid i	imployees,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).	
	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
Don Andress		-		
9103 W Alta Dr #1504	Director			
Las Vegas NV 89145	1.00	0.	0.	0.
Madeleine Andress				
9103 W Alta Dr #1504 Las Vegas NV 89145	Director	^		
Las Vegas NV 89145	1.00	0.	0.	0.
Melanie Tobiasson 4116 Highland Castle Ct	Director			
Las Vegas NV 89135	1.00	0.	0.	o.
Louwanna Andress	1.00	0.	9.	· · · · · · · · · · · · · · · · · · ·
10906 Iris Canyon Ave	Director			
Las Vegas NV 89135	1.00	0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
None			compensation	
		-		
Total number of other employees paid over \$50,000 .			·	None
ВАА	TEEA0306 12/			Form <b>990-PF</b> (2012)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	,,,
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
·	 
2	
3	
<sup>4</sup>	
	·
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program related investments. Con under these	
All other program-related investments. See instructions 3	
<b>"</b>	
Total. Add lines 1 through 3	
BAA	Form <b>990-PF</b> (2012)
	· \- · · -/

For	m <b>990-PF</b> (2012) Andress Family Foundation	88-0396633	Page 8
· Pa	Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign foundatior	18,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  A Average monthly fair market value of securities	1a	
	b Average of monthly cash balances		
	Fair market value of all other assets (see instructions)		
	<b>d Total</b> (add lines 1a, b, and c)		
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5			0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope and certain foreign organizations check here and do not complete this part	t.)	
1		1	0.
	a Tax on investment income for 2012 from Part VI, line 5	0.	
	b Income tax for 2012. (This does not include the tax from Part VI.)		
	C Add lines 2a and 2b	11	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		0.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·		0 .
6	Deduction from distributable amount (see instructions)		
	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Pa	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.  Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		216,200.
	b Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the  Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	216,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	216,200.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years	<u> </u>	

BAA

Form 990-PF (2012)

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	( <b>c</b> ) 2011	( <b>d</b> ) 2012
Distributable amount for 2012 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2012				•
a Enter amount for 2011 only			0.	
<b>b</b> Total for prior years: 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2012				
a From 2007				
<b>b</b> From 2008 0 .				
<b>c</b> From 2009 0 .			-	
<b>d</b> From 2010				
e From 2011 242,275.				
f Total of lines 3a through e	596,902.			
4 Qualifying distributions for 2012 from Part	390,902.		<del></del>	· · · · · · · · · · · · · · · · · · ·
XII, line 4: \$ 216,200.		•		
a Applied to 2011, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
<b>d</b> Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus	216,200.			
5 Excess distributions carryover applied to 2012				
(If an amount appears in column (d), the same amount must be shown in column (a) )				
Same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	813,102.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-	<del></del>	0.		
ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount – see instructions		0		
		0.		
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount — see instructions	·····		0.	
f Undistributed income for 2012 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	813,102.			
10 Analysis of line 9	013,102.			· · · · · · · · · · · · · · · · · · ·
a Excess from 2008 0				
<b>b</b> Excess from 2009 0 .				
<b>c</b> Excess from 2010	İ		İ	
<b>d</b> Excess from 2011			İ	
e Excess from 2012				
210,200.				

	to to to the total a	ctions and Part	VII-A, question 9	)	N/A
a If the foundation has received a ruling or dete	rmination letter that	it is a private opera	iting foundation, and	the ruling	-
is effective for 2012, enter the date of the rulir <b>b</b> Check box to indicate whether the foundation	-			4942(j)(3) or	4042(1)(5)
a Enter the lesser of the adjusted net	Tax year	Tig loundation descri	Prior 3 years	4942(J)(3) OI	4942(J)(5)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total
<b>b</b> 85% of line 2a	<del></del>	Ï	<u> </u>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon	201				
a 'Assets' alternative test — enter					
(1) Value of all assets			ļ . <u></u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
o 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information ( assets at any time during the	Complete this	part only if the	foundation had	l \$5,000 or more	in
Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more	than 2% of the total \$5,000) (See secti	contributions receive ion 507(d)(2).)	d by the foundation be	efore the
List any managers of the foundation who own	10% or more of the	stock of a corporate	tion (or an equally lar	ge portion of the owne	rship of
a partnership or other entity) of which the four	ndation has a 10% of	or greater interest			·
Information Regarding Contribution, Grant				does not accent unso	alicited
Check here In the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d	kes contributions to fts, grants, etc (see	preselected charita instructions) to indi	ble organizations and viduals or organizatio	ns under other conditi	
Check here In the foundation only maker requests for funds. If the foundation makes grouplete items 2a, b, c, and do The name, address, and telephone number of	kes contributions to fts, grants, etc (see	preselected charita instructions) to indi	ble organizations and viduals or organizatio	ns under other conditi	
Check here In the foundation only maker equests for funds. If the foundation makes grouplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress	kes contributions to fts, grants, etc (see	preselected charita instructions) to indi	ble organizations and viduals or organizatio	ns under other conditi	
Check here if the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress  2300 W Sahara Ave, STE 670	kes contributions to fts, grants, etc (see r e-mail of the perso	preselected charita instructions) to indi- on to whom applicat	ble organizations and viduals or organizatio	ns under other conditions	ons,
Check here if the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d.  The name, address, and telephone number of Madeleine Andress 2300 W Sahara Ave, STE 670 Las Vegas	kes contributions to fts, grants, etc (see re-mail of the person NV 89102	preselected charita instructions) to indi- on to whom applicat	ble organizations and viduals or organizatio ions should be addre	ns under other conditi	ons,
Check here if the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress 2300 W Sahara Ave, STE 670 Las Vegas	kes contributions to fts, grants, etc (see re-mail of the person NV 89102 mitted and informations.)	preselected charita instructions) to indiverse to whom applicate the control of t	ble organizations and viduals or organizatio ions should be addre	ns under other conditions	ons,
Check here if the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress 2300 W Sahara Ave, STE 670  Las Vegas  The form in which applications should be substituted in the substituted any	kes contributions to fts, grants, etc (see re-mail of the person NV 89102 mitted and informations.)	preselected charita instructions) to indiverse to whom applicate the control of t	ble organizations and viduals or organizatio ions should be addre	ns under other conditions	ons,
Check here Inf the foundation only maker requests for funds. If the foundation makes gromplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress  2300 W Sahara Ave, STE 670  Las Vegas  The form in which applications should be subtractions.	kes contributions to fts, grants, etc (see re-mail of the person NV 89102 mitted and informations.)	preselected charita instructions) to indiverse to whom applicate the control of t	ble organizations and viduals or organizatio ions should be addre	ns under other conditions	ons,
Check here if the foundation only maker equests for funds. If the foundation makes gromplete items 2a, b, c, and d  The name, address, and telephone number of Madeleine Andress 2300 W Sahara Ave, STE 670  Las Vegas  The form in which applications should be substituted by the substituted any submission deadlines	kes contributions to fts, grants, etc (see re-mail of the person NV 89102 mitted and information related ma	preselected charita instructions) to indivent to whom applicate 2 on and materials therials	ble organizations and viduals or organization ions should be addressed by the should include:	ns under other conditions andressent@	ons,

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
Junior League of Las Vegas			Promote Volunteerism and	
861 Bridger			improve the community	
Las Vegas NV 8910:	<u>L</u>	501 c3		0.
Air Force Aid Society			Aid to family of active duty	
Nellis Air Force Base			members of the Airforce	
Las Vegas NV 8911	•	501 c3		0.
Nathan Adelson Hospice	0		Support of nonprofit	
4141 S Swensen			Hospice care	
Las Vegas NV 8911	,	501 c3	_	0.
Nevada Ballet Theatre			Development of	
1651 Inner Circle			the performing	
Las Vegas NV 8911		501 c3	larts	0.
Nevada Womens Philanthropy	5000		Promote Philanthropy	
1635 Village Center Circle #160	(		in NV	
Las Vegas NV 8913	i	501 c3		5,000.
Opportunity Village		301 63	Promote the interests of	3,000.
6050 S Buffalo Dr			persons with severe	
		L 01 - 2	-	2 000
	3	501 c3	intellectual disabilities	2,000.
Charlotte Hill Society			Help public service media to	
3050 E Flamingo Rd			serve the community	
Las Vegas NV 8912		501 c3		1,200.
Sam Schmidt Paralysis Foundatio	n	İ	Research and cure of Paralysis	
PO Box 24355				
Speedway IN 4622	l l	501 c3	<u> </u>	6,000.
Make a Wish Foundation		1	Help children battling life threatening	
5105 S. Durango Dr, STE 100			medical conditions	
Las Vegas NV 8911	3	501 C3		1,000.
See Line 3a statement				
			1	201,000.
			ł	
Total			3a	216,200.
<b>b</b> Approved for future payment			•	
			1	
			-	
,		· ·		
	L	<u> </u>	<u> </u>	
Total				

### PartixVIA Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
_	am service revenue			code		,
a						
b				-		
с						
u	<del>-</del>					
·				-		
a Fees	and contracts from government agencies .					
	pership dues and assessments					
	t on savings and temporary cash investments	522110	18.			
	ends and interest from securities	322110	10.			
	ental income or (loss) from real estate			4 7 76	Figure 1 Anno 1	
	financed property	72,000 00 00 00 00 00 00				
	ebt-financed property			<del></del>		
	ntal income or (loss) from personal property					
	investment income					
8 Gain o	r (loss) from sales of assets other than inventory .		<del></del>			
	come or (loss) from special events					
	s profit or (loss) from sales of inventory					
11 Other	revenue.				The second secon	
a		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			The second secon	
b						
_						
d						
e						
e Subto	otal. Add columns (b), (d), and (e)		18.			
e Subto	. Add line 12, columns (b), (d), and (e)		18.		13	18.
e Subto	otal. Add columns (b), (d), and (e)		18.		13	18.
e Subto	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations	5.)			13	18.
e Subto 13 Total (See works)	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e Subto	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total (See works) Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	
e 12 Subto 13 Total See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations  Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	ooses	

# Form 990-PF (2012) Andress Family Foundation 88-0396633 | Page 2012 | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										Yes	No
1 D	id the d	organization directly ed in section 501(c)	y or indirectly eng	age in any of th	ne following with	any other o	organization				
re	elating	to political organiza	itions?	er man section	our(c)(o) organi.	zalions) oi	in section 527,				
	_	s from the reporting		noncharitable e	xempt organizat	ion of					
			<del>-</del>						1 a (1)		Х
											X
•	•	ansactions							14 (2)		
				_,					4 5 (4)		
									<del></del>		_X
	-								· · · ·		Х
	•	•	•						<u> </u>		X
(4	l) Reir	mbursement arrang	ements						1 b (4)		Х
(5	i) Loai	ns or loan guarante	es		. <b></b>				1 b (5)		Х
(6	) Perf	formance of service	s or membership	or fundraising	solicitations				1 b (6)		Х
c S	haring	of facilities, equipm	nent, mailing lists,	other assets, o	r paid employee	s			1 c		Х
	Ū		, ,	, .					L	1	
th	e good	swer to any of the a is, other assets, or saction or sharing a	services given by	the reporting for	oundation If the	foundation	received less th	show the fair market v nan fair market value ervices received	alue of In		
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable ex	empt organization	(d	) Description of tra	nsfers, transactions, and s	haring arran	gements	 5
		-			<del>`</del>	<u> </u>	<u> </u>		<del>`</del>		
-	$\neg \vdash$					<del></del>		·· <u>-</u>			
			<del></del>	<del></del>							
	_					-					
	-										
		_									
			<u> </u>						-		
		·									
			<del></del>			_					
de	escribe	undation directly or d in section 501(c) complete the follow	of the Code (other	d with, or relate er than section (	ed to, one or mor 501(c)(3)) or in s	e tax-exem ection 527	npt organizations?	S 	. Yes	×	No
	(a)	) Name of organiza	tion	<b>(b)</b> Ty	pe of organization	n	(	c) Description of relat	ionship		
							, ·		•		
							· · · · · · · · · · · · · · · · · · ·				
		•									
					<del></del>						
		<del></del>	•			<del> </del>	<u> </u>		· · · · · · · · · · · · · · · · · · ·		—
	l la des a		are that I have account			- 4. 1 4 - 4 -			had about the co	<del></del>	
	correct,	and complete Declaratio	n of preparer (other tha	n taxpayer) is based	ng accompanying sch d on all information of	edules and sta which prepare	tements, and to the t r has any knowledge	est of my knowledge and be	eller, it is true,		
Sign		(/ ) () <u>(</u>		) /			_		May the I	RS discu	ss
Here		TTTUAVIL	1 And	SON	1		G-12.	.12	this return preparer		
11010	Signa	ture of officer or trustee		<u>~</u>	Date		itle	<u> </u>	(see instr	uctions)?	<u>`</u>
	Gigila	Print/Type preparer's na	ame	Drangrar	s signature	<del>-72 '</del>	Date		I PTIN	Yes	No
		i iniu i ype piepaiet s iii	and	Freparer	3 Signature	///	10 .12	Check X if	1		
Paid		Keri Pettit	t	Keri	Petrit	W-	17/2-/	3 self-employed	P01549	208	
Prepa	rer	Firm's name	KERI PETTI	T CPA				Firm's EIN ►			
Use O		Firm's address	132 Serena	ade Ct							
			HENDERSON			NV 89	074	Phone no (702)	) 419-3	3352	
BAA		·			_		- · -	(,02	Form 990		2012\
										- • • \~	,

#### Schedule B

· (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

Name of the organization	Employer identification number						
Andress Family Foundation	88-0396633						
Organization type (check one):	-						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) org	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable tri	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation					
	527 political organization	527 political organization					
	□ · ·						
Form 990-PF	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable tr	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation	501/c)/3) tayable private foundation					
	oo (o)(o) axable pirrate isandalisi	•					
Check if your organization is covered by the	ne General Rule or a Special Rule						
	·	and Dula and a Charlet Dula. Con instructions					
<b>Note.</b> Only a section 501(c)(7), (8), or (10	) organization can check boxes for both the Gen	eral Rule and a Special Rule See Instructions.					
General Rule							
For an organization filing Form 990, 9 contributor. (Complete Parts I and II.)	90-EZ, or 990-PF that received, during the year,	\$5,000 or more (in money or property) from any one					
contributor. (Complete Farts Farid II.)							
Special Rules							
	ling Form 990 or 990-EZ that met the 33-1/3% subjected from any one contributor, during the year,						
	Part VIII, line 1h or (ii) Form 990-EZ, line 1 Con						
	ganization filing Form 990 or 990-EZ that receive						
total contributions of more than \$1,000 the prevention of cruelty to children or	0 for use <i>exclusively</i> for religious, chantable, scie	entific, literary, or educational purposes, or					
` ` `	ganization filing Form 990 or 990-EZ that receive	ed from any one contributor, during the year					
contributions for use exclusively for re	ligious, charitable, etc, purposes, but these conti	inbutions did not total to more than \$1,000					
	otal contributions that were received during the yearts unless the <b>General Rule</b> applies to this org						
	of \$5,000 or more during the year	•					
Caution: An organization that is not covered	by the General Rule and/or the Special Rules does n	not file Schedule B (Form 990, 990-EZ, or 990-PF) but it <b>must</b> on Part I, line 2, of its Form 990-PF, to certify that it does not					
meet the filing requirements of Schedule I	3 (Form 990, 990-EZ, or 990-PF)	on Fait 1, line 2, or its Form 330-FF, to certify that it does not					
BAA For Paperwork Reduction Act No	tice, see the Instructions for Form 990, 990EZ	Z. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)					
or 990-PF.	,	,					

Name of org	anization	Er	mployer identification number
Andres	ss Family Foundation	8	8-0396633
Pertu	Contributors (see instructions) Use duplicate copies of Part I if additional space is need	eded	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Andress Family Trust, dated 2/15/85	-	Person 🗓
	2300 W Sahara Ave Ste 670	\$200.0	
	Las Vegas NV 89102		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ - -	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution.)
BAA	TEEA0702 11/30/12	Schedule <b>B</b> (Fo	orm 990, 990-EZ, or 990-PF) (2012)

Page

1 of

1 of **Part 1** 

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year The Smith Center for Performing Arts 241 W Charleston Blvd sTE 111 Las Vegas NV 89102 UNLV Athletic Foundation		 501 C3	Promotion of arts and education in Clark County NV  Support education and	Person or Business X 200,000. Person or
Maryland Parkway  Las Vegas NV 89154		501 c3	athletic programs	Business X  0.  Person or
		501 c3		Business X
The Public Education Foundation 3360 W Sahara Ave STE 160 Las Vegas NV 89102		 501 c3	Support to Clark County School District	Person or Business X 1,000.
		 501 c3		Person or Business X
YMCA of Southern Nevada 101 N. Wacker Dr Chicago IL 60606		 501 c3	support and development of youth in southern NV	Person or Business X 0.

Total

201,000.